Effective clober 1, 2000												
CLAIMS AS FILED - PART I (Column 2)							SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS						RATE FEE		٦	RATE	1 /2 · Y)		
FOR	NUM	NUMBER FILED		NUMBER EXTRA		C FE		١	BASIC FEI			
TOTAL CHARGEABLE	CLAIMS /1	/ 2 minus 20=				XS 9=		1	X\$18⇒	asc		
INDEPENDENT CLAIMS	1	/ 'minus 3 =		• —		X40=		OR	X80=	-		
MULTIPLE DEPENDENT	CLAIM PRESENT	RESENT YES		5 🗆				OR		/		
* If the difference in colo	umn 1 is less tha	less than zero enter "0" in			<u> </u>	35=	<u> </u>	OR	+270=			
		MENDED - PART II			TO	TAL		JOR	TOTAL	860		
(Col	umn 1)	(Column 2) (Column 3)			SMALL ENTITY OR				OTHER THAN SMALL ENTITY			
REM A AMEN	AIMS VAINING FTER VIDMENT	HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total · /	Minus Minus	- 20	0 .	-	XS	9=	1	OR	X\$18=	, .		
Independent • FIRST PRESENTATION	Minus	Z		- /	X4	0=		OR	X80-	/		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+13	5=	1	OR	+270=				
11/20/10	0 10.				ADDIT.	STAL		OR	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)												
REM.	AINING TER IDMENT	HIGHE NUMB PREVIOUS PAID F	USLY	PRESENT EXTRA	RA	ſΈ	ADDI- TIONAL FEE/		RATE	ADDI- TIONAL FER		
O Total	Minus	. 2	0 =		XS	9==	7.	OR	X\$18=	/ .		
Independent FIRST PRESENTATION	Minus	3	3 -		X40)3		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<u></u>	+13	5=		OR	+270=	/		
				•	ADDIT.	TAL		OR ,	TOTAL DDIT, FEE			
(Column 1) (Column 2) (Column 3)												
REMA AFI AMENI	INING TER DMENT	HIGHE: NUMBE PREVIOU PAID FO	ER P	RESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
Total	euniM	••	-		X\$ 9	=		OR	X\$18≖	·		
Independent .	Minus	5051:05:5	-		X40			Ī	X80=	:		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		OR				
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						= [AL		OR L	+270= TOTAL			
The "Highest Number Previously Paid For" (Total or Independent) is the highest number bund in the appropriate box in coturn 1.												
WEM PTO-678												

Application or Docket Number